FORM D

1407366

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

SEC Mail Processing Section

FORM D

NOTICE OF SALE OF SECURITIES MAY 16 2008 PURSUANT TO REGULATION D,

SECTION 4(6), AND/OR Washington, DC UNIFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL

3235-0076 OMB Number:

April 30, 2008

Expires Estimated average burden

hours per response:

16.00

SEC USE ONLY						
Prefix		Serial				
	1					
	DATE R	ÉCEIVED				

Name of Offering (☐ check if this is an amendment and name has changed, and indicate change.)										
Vontobel: Non-US Equity LLC: Limited Liability Company Units										
Filing Under (Check box(es) that apply): ☐ Rule 504 ☐ Rule 505 ☑ Rule 506	☐ Section 4(6) ☐ ULOE									
Type of Filing: ☐ New Filing ☑ Amendment										
A. BASIC IDENTIFICATION DATA	1 10 0115 00 10 1 115 S 03 101 0 16 F 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1									
1. Enter the information requested about the issuer										
Name of Issuer (☐ check if this is an amendment and name has changed, and indicate change.)										
Vontobel: Non-US Equity LLC 08048734										
Address of Executive Offices (Number and Street, City, State Zip Code)	Telephone Number (including Area Code)									
One New York Plaza, New York, New York 10004	(212) 902-1000									
Address of Principal Business Operations (Number and Street, City, State and Zip Code)	Telephone Number (Including Area Code)									
(if different from Executive Offices)	nen.									
PROCES										
Brief Description of Business										
To operate as a private investment fund. MAY 2 2 2008										
Type of Business Organization	DELITEDO									
Type of Business Organization corporation limited partnership, already formed	other (please specify):									
☐ business trust ☐ limited partnership, to be formed ☐ Limited Liability Company										
Month Year										
Actual or Estimated Date of Incorporation or Organization: 0 5 7	☑ Actual ☐ Estimated									
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for										
State: CN for Canada; FN for other foreign ju										
CEMEDAL INCTRICTIONS										
CENERAL INSTRUCTIONS										

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee; There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collections of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

A. BASIC IDENTIFICATION DATA
2. Enter the information requested for the following:
* Each promoter of the issuer, if the issuer has been organized within the past five years;
* Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
* Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
* Each general and managing partner of partnership issuers.
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director ☑ General and/or Managing Partner
Full Name (Last name first, if individual)
Goldman Sachs Asset Management, L.P. (the Issuer's Managing Member)
Business or Residence Address (Number and Street, City, State, Zip Code)
One New York Plaza, New York, New York 10004
Check Box(es) that Apply: Promoter Beneficial Owner * of the Issuer's Managing Member General and/or Managing Partner
Full Name (Last name first, if individual)
Asali, Omar M.
Business or Residence Address (Number and Street, City, State, Zip Code)
One New York Plaza, New York, New York 10004
Check Box(cs) that Apply:
Full Name (Last name first, if individual)
Barbetta, Jennifer
Business or Residence Address (Number and Street, City, State, Zip Code)
One New York Plaza, New York, New York 10004
Check Box(es) that Apply: Promoter Beneficial Owner * of the Issuer's Managing Member General and/or Managing Partner
Full Name (Last name first, if individual)
Gottlieb, Jason
Business or Residence Address (Number and Street, City, State, Zip Code)
One New York Plaza, New York, New York 10004
Check Box(es) that Apply: Promoter Beneficial Owner * of the Issuer's Managing Member General and/or Managing Partner
Full Name (Last name first, if individual)
Ort, Peter
Business or Residence Address (Number and Street, City, State, Zip Code)
One New York Plaza, New York, New York 10004
Check Box(cs) that Apply: Promoter Beneficial Owner * of the Issuer's Managing Member General and/or Managing Partner
Full Name (Last name first, if individual)
Ross, Hugh M.
Business or Residence Address (Number and Street, City, State, Zip Code)
One New York Plaza, New York, New York 10004
Check Box(cs) that Apply:
Full Name (Last name first, if individual)

Business or Residence Address (Number and Street, City, State, Zip Code)

				B. IN	FORMAT	ION ABO	UT OFFI	ERING				
			. ,	D, 1,1	014.11.11	10111120	<u> </u>				Yes	No
1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?										Ø		
Answer also in Appendix, Column 2, if filing under ULOE.												
2. What is the minimum investment that will be accepted from any individual?									\$	*		
*The Issu	er's Manag	er may in i	ts sole disc	retion acce	pt subscrip	tion amour	nts in what	ever amoun	t it determ	ines is	Yes	No
acceptable	e.	,										_
	-	-									Ø	
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.												
		first, if ind				- 					·	
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·												
_	the securi in any jur		sold throu	gh Goldma	n, Sachs &	Co., no co	mmissions	will be paid	, directly o	r indirectly	, for solicit	ing any
Business of	r Residence	e Address (1	Number and	Street, City	y, State, Zip	Code)						
05 D	Causas Nau	Vault Mai	a. Vanle 10	204								
		v York, New Broker or De		JU4								
Ctatas in V	Which Dorso	n Listad Ha	a Calinitad	au Intenda t	o Solicit Pu	rohosors						
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[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full Name	(Last name	first, if ind	ividual)									
Business o	r Residence	Address (1	Number and	Street, City	y, State, Zip	Code)						
Name of A	ssociated E	roker or De	aler						. •			
States in V	Vhich Perso	n Listed Ha	s Solicited	or Intends t	o Solicit Pu	rchasers						
											🗆 Al	I States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full Name	(Last name	first, if ind	ividual)									
			·									
Business o	r Residence	e Address (1	Number and	Street, City	y, State, Zip	Code)						
Name of A	ssociated E	Iroker or De	aler								· · · · · · · · · · · · · · · · · · ·	
									<u> </u>			
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)									All States			
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	(OK)	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	(UT)	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.			
	Type of Security		Aggregate Offering Price	Amount Already Sold
	Debt	\$_	0	\$ 0
	Equity	\$	0	\$ 0
	☐ Common ☐ Preferred	_	-	
	Convertible Securities (including warrants)	\$_	0	\$ 0
	Partnership Interests	\$_	0	\$ 0
	Other (Specify): Limited Liability Company Units	\$_	814,517,191	\$ 814,517,191
	Total	\$	814,517,191	\$ 814,517,191
	Answer also in Appendix, Column 3, if filing under ULOE.			
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."			A
			Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors		478	\$ 814,517,191
	Non-accredited Investors	_	0	\$ 0
	Total (for filings under Rule 504 only)	_	N/A	\$ N/A
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.			
	Type of offering		Type of Security	Dollar Amount Sold
	Rule 505		N/A	\$ N/A
	Regulation A		N/A	\$ N/A
	Rule 504		N/A	\$ N/A
	Total	_	N/A	\$ N/A
th th	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of the expenditure is not known, furnish an estimate and check the box to the left of the estimate.			
	Transfer Agent's Fees			\$. 0
	Printing and Engraving Costs			\$ 0
	Legal Fees		ゼ	\$ 136,875
	Accounting Fees		□	\$ 0
	Engineering Fees.		Ö	\$ 0
	Sales Commissions (specify finders' fees separately)			\$ 0
	Other Expenses (identify)			\$ 0
	Total		Ø	\$ 136,875

	C. OFFERING PRICE, NUMB	BER OF INVESTORS, EXI	PENS	SES A	AND USE OF P	ROCE	EDS	
	b. Enter the difference between the aggregate officerence of and total expenses furnished in residifference is the "adjusted gross proceeds to the issue."	fering price given in response to sponse to Part C - Question 4.a	o Part (a. Thi	C nis		\$_		814,380,316
5.	Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C - Question 4.b. above.							
					Payments to Officers, Directors, & Affiliates			Payments To Others
	Salaries and Fees			\$_	0	_ 🗆	\$_	0
	Purchase of real estate			\$_	0	_ 🗆	\$_	0
	Purchase, rental or leasing and installation of mach	hinery and equipment		\$_	0	_ 0	\$_	0
	Construction or leasing of plant buildings and facil	lities		\$_	0		\$_	0
	Acquisition of other businesses (including the val this offering that may be used in exchange for another issuer pursuant to a merger)	r the assets or securities of		\$	0		\$	0
	Repayment of indebtedness			\$	0		\$	0
	Working capital			\$ \$	0		s –	0
	Other (Specify): Limited Liability Company Uni			\$ \$	0	- ⊠	s —	814,380,316
	Column Totals		\$_	0		s _	814,380,316	
	Total Payments Listed (column totals added)	☑ \$	814,380,316					
_		D. FEDERAL SIGNATUI	RE					
fo	The issuer has duly caused this notice to be signed collowing signature constitutes an undertaking by the fits staff, the information furnished by the issuer to a	e issuer to furnish to the U.S. So	ecuriti	ies and	d Exchange Comm	mission,	upon	
	uer (Print or Type) ntobel: Non-US Equity LLC	Signature Oxid / Kraw	T		Date May 4 2008			
		Title of Signer (Print or Type) Assistant Secretary of the Issu		Mana	iging Member			

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001).

END